PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003

Application or Docket Number

(Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			.0				Γ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		8	ASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			// minus 20=		. 0		Γ	X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			/ minus 3 = 1		* 8		Ī	X42=		OR	X84= -	526
ΜU	LTIPLE DEPEN	DENT CLAIM PI	RESENT	SENT			ľ	+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2							L	TOTAL		OR	TOTAL	1086
CLAIMS AS AMENDED - PART II								OTHER THAN SMALL ENTITY OR SMALL ENTITY				
		(Column 1)	(Column 2)			(Column 3)				OR	SMALL	ENIIIY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Q W	Total	. 10	Minus	"A	2	= /		X\$ 9=	/	OR	X\$18=	
AME	Independent	. 7	Minus	***	7	-/		X42=		OR	X84=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDENIC	LAIM			+140=		OR	+280=	
TOTA										OR	TOTAL ADDIT, FEE	
	(Column 1) (Column 2) (Column 3)							DDIT. FEE		,	ADDII. FEE	
		CLAIMS		HIGHEST		100.0	1 6	1	ADDI-	1		ADDI-
9		REMAINING		NUMBE PREVIOL		PRESENT		RATE	TIONAL		RATE	TIONAL
		AFTER AMENDMENT		PAID FO		EXTRA	Ł		FEE			FEE
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	31 4114	-		X42=		OR	X84=	
	FIRST PRESE	NIATION OF M	ULTIPLE DEP	LTIPLE DEPENDENT CLAIM			ן י	+140=		OR	+280=	
								TOTAL			TOTAL	
								DDIT. FEE		OR	ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
16		CLAIMS REMAINING			HIGHEST NUMBER	PRESENT	lг		ADDI-	7		ADDI-
		AFTER		PREVIOL	JSLY	EXTRA		RATE	TIONAL		RATE	TIONAL
		AMENDMENT		PAID F	OR		▍┝		FEE		<u> </u>	FEE
100	Total	*	Minus	**		•	11	X\$ 9=		OR	X\$18=	
AMENDMENT C	Independent	* NTATION OF M	Minus	SENDENT	CL AILA	=	łΓ	X42=		OR	X84=	
-	FIRST PRESE	INTATION OF M	OLTIPLE DE	PENDENT	CLAIM		」	+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
**If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **OTAL ADDIT. FEE OR ADDIT. FEE												
	The *Highest Nur	nber Previously Pa	id For (Total o	r independer	nt) is the	highest numbe	er four	nd in the ap	propriate bo	x in co	dumn 1.	
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